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Bib Data Sheet

CONFIRMATION NO. 7316

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|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|
| SERIAL NUMBER 10/804,322 | FILING DATE 03/19/2004 RULE | CLASS 607 | GROUP ART UNIT 3766 | ATTORNEY DOCKET NO. P-11455.00 |
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APPLICANTS

Kevin A. Wanasek, Princeton, MN;

** CONTINUING DATA *****

None Dam

** FOREIGN APPLICATIONS *****

None Dam

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/30/2004

| | | | | |
|---|----------|---------|--------|-------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR | SHEETS | TOTAL | INDEPENDENT |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | COUNTRY | DRAWING | CLAIMS | CLAIMS |
| Verified and Acknowledged Examiner's Signature <i>malamua</i> Initials | MN | 8 | 24 | 4 |

ADDRESS

27581
 MEDTRONIC, INC.
 710 MEDTRONIC PARKWAY NE
 MS-LC340
 MINNEAPOLIS , MN
 55432-5604

TITLE

Method and apparatus for delivering multi-directional defibrillation waveforms

| | | |
|------------------------------------|---|--|
| FILING FEE RECEIVED 1058 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ |
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